UTAH LABOR COMMISSION

Division of Boiler and Elevator Safety 160 East 300 South, 3rd Floor PO Box 146620

Salt Lake City, Utah 84114-6620 Phone: (801) 530-6850 Fax: (801) 530-6871



NEW ELEVATOR INSPECTION REQUEST

Requesting Company:				
Requestor Name:				
Requestor Phone:				
Requestor Email:				
Inspection Contact Name:				
Inspection Contact Phone:				
Inspection Contact Email:				
Location Name:				
Location Address:				
Location City:				
Location County:				
Location Zip:				
Type of Unit(s):				
Number of Units:				
Number of Stops per Unit:				
Date(s) Requested:				
\				
Field Weld	ding Information	on (If	applicable)	
Welder Name:				
Welder Certification:	Attached		Submitted	Date:
Date Certified:		•		
Welders Log required with each	submission to e	nsure c	compliance wit	h A17.1 Section 8.8

Special Instructions/Directions: